B22A (Official Form 22A) (Chapter 2/10)

		FMLSD/REC'D	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this
In re Matth	ew John Saari and Shelb	v Ann Saari	
III IC Matai	CW COM COUNT COUNT ON COLOR	•	I
	Debtor(s)	2010 DEC 14 PM 3: 23	☐ The presumption arises.
			☑ The presumption does not arise.
Case Number	er:		☐ The presumption is temporarily inapplicable.
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ine presumption is temporarily mappineable.
	(If known)	Talina Valletti. 1 to	(Check the box as directed in Parts I, III, and VI of this statement.)

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS
T A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors.If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filling a motion raising the means test presumption expires in your case before your exclusion period ends.
10	Declaration of Reservists and National Guard MembersBy checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	 a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed; OR b. I am performing homeland defense activity for a period of at least 90 days /or/ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540
	days before this bankruptcy case was filed.

		Part II. CALCULATION	OF MONTHLY INCO	ME FOR § 707(b)(7) EXCLUS	ION	
		Ufiling status. Check the box that applied in married. Complete only Column A			as directed.	_	
	b. 🗀 N pen livin	Married, not filing jointly, with declaration alty of perjury: "My spouse and I are leg g apart other than for the purpose of evanplete only Column A ("Debtor's Inc	of separate households. By ally separated under applicated ading the requirements of §	checking this box, debtor dec ble non-bankruptcy law or my:	spouse and I ar	re	
2		Married, not filing jointly, without the declumn A ("Debtor's Income") and Colu			Complete	both	
		Married, filing jointly. Complete both Ces 3-11.	olumn A ("Debtor's Incon	ne") and Column B ("Spous	e's Income") f	or	
	calenda If the ar	res must reflect average monthly income ar months prior to filing the bankruptcy o mount of monthly income varied during t er the result on the appropriate line.	ase, ending on the last day	of the month before the filing.		Column A Debtor's Income	Column B Spouse's Income
3	Gross	wages, salary, tips, bonuses, overtin	ne, commissions.			\$3,718.87	\$443.65
	differen farm, er	e from the operation of a business, p ice in the appropriate column(s) of Line inter aggregate numbers and provide det include any part of the business exp Gross receipts Ordinary and necessary business exp Business income	4. If you operate more than on a stack on an attachment. Do not penses entered on Line b	one business, profession or ot enter a number less than ze		\$0.00	\$0.00
5	in the a	nd other real property income. So ppropriate column(s) of Line 5. Do not extrof the operating expenses entered Gross receipts Ordinary and necessary operating expenses.	on Line b as a deduction	O. Do not include			
	C.	Rent and other real property income		Subtract Line b from Line a		\$0.00	\$0.00
6	Interes	t, dividends, and royalties.				\$0.00	\$0.00
		n and retirement income.				\$0.00	\$0.00
8	Do not i complet	nounts paid by another person or enotor or the debtor's dependents, inclinctude alimony or separate maintenance ted. Each regular payment should be repeport that payment in Column B.	uding child support paid to e payments or amounts paid	f or that purpose. I by your spouse if Column B is	5	\$0.00	\$0.00
9	Howeve was a b	loyment compensation. Enter the er, if you contend that unemployment contend that unemployment contended the Social Security Act, do a A or B, but instead state the amount in	not list the amount of such	or your spouse			
		ployment compensation claimed to penefit under the Social Security Act	Debtor \$0.00	Spouse \$0.00		\$0.00	\$0.00
10	separate if Colur Do not i crime, o	·	separate maintenance pather payments of alimony Social Security Act or paym	ents received as a victim of a v rrorism.	9		
	a.			0			
	b.	and enter on Line 10				\$0.00	\$0.00
		all of Current Monthly Income for § 7	07(b)(7). Add Lines 3 thn	u 10 in		40.00	Ψ0.00
11		A, and, if Column B is completed, add	. , ,			\$3,718.87	\$44 3.65

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Total Current Monthly Income for § 707(b)(7). If Column B has been completed,	
add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been	
completed, enter the amount from Line 11, Column A.	\$4,162.52

	Part III. APPLICATION OF § 707(b)(7) EXCLUSION	
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$49,950.24
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at or from the clerk of the bankruptcy court.) WISCONSIN.	\$65,187.00
	a. Enter debtor's state of residence: WISCONSIN b. Enter debtor's household size: 3 Application of Section 707(b)(7). Check the applicable box and proceed as directed.	
15	☑ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption do not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII.	oes
Handy del	The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.	

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

	Part IV. CALCULATION OF	CURRENT MONTHLY INCOME FOR § 707(b)(2)	
16	Enter the amount from Line 12.		\$
	Column B that was NOT paid on a regular basis for the dependents. Specify in the lines below the basis for e spouse's tax liability or the spouse's support of person	2.c, enter on Line 17 the total of any income listed in Line 11, the household expenses of the debtor or the debtor's excluding the Column B income (such as payment of the ns other than the debtor or the debtor's dependents) and cessary, list additional adjustments on a separate page. If	
	a.	\$	
	b.	\$	
	c.	\$	
	Total and enter on Line 17		\$
18	Current monthly income for § 707(b)(2). Subtract	Line 17 from Line 16 and enter the result.	\$

	Part V. CALCULATION OF DEDUCTIONS FROM INCOME	1000
	Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)	Artini III
	National Standards: food, clothing, and other items. Enter in Line 19A the "Total" amount from IRS National	
	Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available	
19A	at or from the clerk of the bankruptcy court.) The applicable number of persons is the	
DAME OF	number that would currently be allowed as exemptions on your federal income tax return, plus the number of	
eros totalo y ero de la companya de La companya de la co	any additional dependents whom you support.	\$

19B	Heal from year appl allow you Line	onal Standards: health care. Enter th Care for persons under 65 years of age, th Care for persons 65 years of age or olde in the clerk of the bankruptcy court.) Enter in s of age, and enter in Line b2 the applicable icable number of persons in each age cate wed as exemptions on your federal income to support.) Multiply Line a1 by Line b1 to obtain a Add Lines c1 and c2 to obtain a total health	and in Line a2 tr er. (This informati I Line b1 the appl e number of pers gory is the numbe tax return, plus th ain a total amount total amount for p	ne IRS ion is licable ons w er in the ne num t for p	available at enumber of persons who are u tho are 65 years of age or olde nat category that would curren nber of any additional depende ersons under 65, and enter the is 65 and older, and enter the	of-Pocket or under 65 er. (The itly be ents whom e result in			
	Нс	ousehold members under 65 years of ag	je	Но	usehold members 65 years	of age or o	lder		
	a1.	Allowance per member		a2.	Allowance per member				
	b1.	Number of members		b2.	Number of members				
	c1.	Subtotal	_	c2.	Subtotal		· · · · · · · · · · · · · · · · · · ·		\$
20A	IRS infor size	al Standards: housing and utilities; non Housing and Utilities Standards; non-morto mation is available at consists of the number that would currently the number of any additional dependents w	gage expenses for or from the clerk y be allowed as e	or the c of the xemp	applicable county and family s e bankruptcy court). The appli	icable family			\$
20B	at num addir secu	al Standards: housing and utilities; more sing and Utilities Standards; mortgage/rent or from the clerk of the ber that would currently be allowed as exertional dependents whom you support); entered by your home, as stated in Line 42; su not enter an amount less than zero.	expense for your e bankruptcy cou nptions on your for on Line b the to	r coun rt) (th ederal stal of	ty and family size (this informate applicable family size consist income tax return, plus the nuthe Average Monthly Payment	ation is availa sts of the umber of any ts for any det	able ,		
in the last defeat	a.	IRS Housing and Utilities Standards; mo		ense	\$	5		\parallel	
	b.	Average Monthly Payment for any debts home, if any, as stated in Line 42	secured by your		s	:			
V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-	C.	Net mortgage/rental expense					b from Line a.] :	\$
21	Line: Hous	al Standards: housing and utilities; adjusted and 20B does not accurately computed and Utilities Standards, enter any addition the basis for your contention in the space	te the allowance t tional amount to v	o whi		RS			\$
	You	al Standards: transportation; vehicle op are entitled to an expense allowance in this ating a vehicle and regardless of whether y	category regard	ess o	f whether you pay the expense	s of			
22A	ехре	ck the number of vehicles for which you paynses are included as a contribution to your 1 1 2 or more.		-					
	you (u checked 0, enter on Line 22A the "Public checked 1 or 2 or more, enter on Line 22A asportation for the applicable number of veh	the "Operating Co	osts"	amount from IRS Local Standa	ards:	on. If		
		on. (These amounts are available at	••		om the clerk of the bankruptcy				\$
22B	for a	al Standards: transportation; additional vehicle and also use public transportation, our public transportation expenses, enter our dards: Transportation. (This amount is available)	and you contend n Line 22B the "F	that	you are entitled to an additiona	al deduction IRS Local			\$

DEED 10	IIICH	11 cm 22A) (chapter 1) (12 10) - Cont			•
	of v	cal Standards: transportation ownership/lease expense; Vehicle ehicles for which you claim an ownership/lease expense. (You may not ense for more than two vehicles.)			
	□ 1	2 or more.			
23	(ava Mor	er, in Line a below, the "Ownership Costs" for "One Car" from the IRS allable at or from the clerk of the bankruptcy countitly Payments for any debts secured by Vehicle 1, as stated in Line as and enter the result in Line 23. Do not enter an amount less	t); enter in Line 42; subtract Lir	b the total of the Average	
	a.	IRS Transportation Standards, Ownership Costs	\$		
	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$		\$
	C.	Net ownership/lease expense for Vehicle 1		e b from Line a.	
224	Cor Ento (ava the	cal Standards: transportation ownership/lease expense; Vehicle inplete this Line only if you checked the "2 or more" Box in Line 23. er, in Line a below, the "Ownership Costs" for "One Car" from the IRS sailable at or from the clerk of the bankruptcy county Average Monthly Payments for any debts secured by Vehicle 2, as standard enter the result in Line 24. Do not enter an amount in the clerk of the bankruptcy county and the clerk of the clerk	S Local Standa rt); enter in Lin ated in Line 42	ne b the total of 2; subtract Line b	
	a	IRS Transportation Standards, Ownership Costs		\$	
	b	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42		\$	
	C.			Subtract Line b from Line a.	\$
25 26	for a emptaxed taxed Oth pays		s, such as inco include real e ployment. ment contribution	enter taxes, self estate or sales Enter the total average monthly	
27	Oth pay	er Necessary Expenses: life insurance. Enter total average m for term life insurance for yourself. Do not include premiums for whole life or for any other form of insurance.	nonthly premiu	-	\$
28	Oth to p	<u> </u>	spousal or chil	amount that you are required d support payments.	\$
29	cha con	er Necessary Expenses: education for employment or for a phy illenged child. Enter the total average monthly amount that you dition of employment and for education that is required for a physically d for whom no public education providing similar services is available.	actually exper y or mentally cl	nd for education that is a	\$
30			-	that you actually expend on ther educational payments.	\$
31	care paid	er Necessary Expenses: health care. Enter the total average that is required for the health and welfare of yourself or your depend by a health savings account, and that is in excess of the amount enter not include payments for health insurance or health savings account.	ents, that is no ered in Line 19	9B.	\$
32	Oth actu	ter Necessary Expenses: telecommunication services. Enter the ually pay for telecommunication services other than your basic home the ers, call waiting, caller id, special long distance, or internet service—welfare or that of your dependents. Do not include any amount	he total average elephone and o to the extent ne	e monthly amount that you cell phone service — such as ecessary for your health	\$
33	Tot	al Expenses Allowed under IRS Standards. Enter the total of Lin	nes 19 through	32	\$

	Note: Do not				
4	•	rance and Health Savings Account I	-	nonthly expenses in the r dependents.	
a.	Health Insurance	•	<u> </u>		
b.	Disability Insurance				
l	Health Savings Account	\$			
C.		\$			
if yo	and enter on Line 34 u do not actually expend the below:	n is total amount, state your actual tot	al average monthly exper	nditures in the	\$
month elderly	ly expenses that you will cont	care of household or family member inue to pay for the reasonable and nece ember of your household or member of	ssary care and support of	of an	\$
incurre		ce. Enter the total average reason our family under the Family Violence Pre ture of these expenses is required to be	vention and Services Act	tor	\$
Local S provid	Standards for Housing and U le your case trustee with d	al average monthly amount, in excess of tilities, that you actually expend for hom ocumentation of your actual expens ot already accounted for in the IRS	e energy costs. You es, and you must dem	must	\$
					
you ac second with d	tually incur, not to exceed \$1- dary school by your depender locumentation of your actu	ent children less than 18. Enter the 47.50* per child, for attendance at a print children less than 18 years of age. all expenses, and you must explain to talready accounted for in the IRS.	total average monthly ex vate or public elementary You must provide you why the amount claime	or or case trustee	\$
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you ac second with d reason Additi-clothin Standa or from reason Total A Future you ow Payme total of filing o the total	tually incur, not to exceed \$1- dary school by your depender locumentation of your acturable and necessary and necessary and necessary and necessary and necessary and necessary. In the clerk of the bankruptcy case, divided all of the Average Monthly Page	ent children less than 18. Enter the 47.50* per child, for attendance at a print children less than 18 years of age. It children is the IRS wense. Enter the total average monoined allowances for food and clothing (it is combined allowances. (This information.) You must demonstrate that wense. Enter the amount that you will one to a charitable organization as defined that it is to a charitable organization as defined that it is seen, identify the property securing the detayment includes taxes or insurance. The contractually due to each Secured Credit of by 60. If necessary, list additional entryments on Line 42.	total average monthly exate or public elementary You must provide you why the amount claime Standards. thly amount by which you apparel and services) in telestion is available at the additional amount continue to contribute in the in 26 U.S.C. § 170(c)(1) of Lines 34 through 40 or Debt Payment cured by an interest in prote, state the Average Monthly Payme or in the 60 months follow ies on a separate page. If Average Monthly Payment	or ur case trustee and is ur food and the IRS National claimed is the IRS national claimed is	\$
you ac second with d reason Additiconting Standard or from reason Total A Future you ow Payme total of filing of the total a.	tually incur, not to exceed \$1- dary school by your depender locumentation of your acturable and necessary and necessary and necessary and necessary and necessary and necessary. In the clerk of the bankruptcy case, divided all of the Average Monthly Page	ent children less than 18. Enter the 47.50* per child, for attendance at a print children less than 18 years of age. It children is the IRS wense. Enter the total average monoined allowances for food and clothing (it is combined allowances. (This information.) You must demonstrate that wense. Enter the amount that you will one to a charitable organization as defined that it is to a charitable organization as defined that it is seen, identify the property securing the detayment includes taxes or insurance. The contractually due to each Secured Credit of by 60. If necessary, list additional entryments on Line 42.	total average monthly exate or public elementary You must provide you why the amount claime Standards. thly amount by which you apparel and services) in telestion is available at the additional amount continue to contribute in the in 26 U.S.C. § 170(c)(1) of Lines 34 through 40 or Debt Payment cured by an interest in prote, state the Average Monthly Payme or in the 60 months follow ies on a separate page. If Average Monthly Payment \$ \$	or ur case trustee and is ur food and the IRS National claimed is the)-(2). topprerty that the thilly ent is the wing the Enter Does payment include taxes or insurance? yes □ no	\$
you ac second with d reason Additi-clothin Standa or from reason Total A Future you ow Payme total of filing o the total a. b.	tually incur, not to exceed \$1- dary school by your depender locumentation of your acturable and necessary and necessary and necessary and necessary and necessary and necessary. In the clerk of the bankruptcy case, divided all of the Average Monthly Page	ent children less than 18. Enter the 47.50* per child, for attendance at a print children less than 18 years of age. It children is the IRS wense. Enter the total average monoined allowances for food and clothing (it is combined allowances. (This information.) You must demonstrate that wense. Enter the amount that you will one to a charitable organization as defined that it is to a charitable organization as defined that it is seen, identify the property securing the detayment includes taxes or insurance. The contractually due to each Secured Credit of by 60. If necessary, list additional entryments on Line 42.	total average monthly exacte or public elementary You must provide you why the amount claime Standards. thly amount by which you apparel and services) in te tion is available at the additional amount continue to contribute in te tin 26 U.S.C. § 170(c)(1 of Lines 34 through 40 or Debt Payment cured by an interest in prote, state the Average Monthly Payment Average Monthly Payment \$ Average Monthly Payment \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	or ur case trustee and is ur food and the IRS National claimed is the)-(2). toprerty that the wing the Enter Does payment include taxes or insurance? yes no yes no yes no	\$
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	reside	r payments on secured or ence, a motor vehicle, or ot	ther property necessary for your support	ine 42 are secured by your primary or the support of your dependents,	
	you n	nay include in your deducti	on 1/60th of any amount (the "cure amou d in Line 42, in order to maintain posses:	unt") that you must pay the creditor	
	would	d include any sums in defa	ult that must be paid in order to avoid rep	possession or foreclosure. List and	
Carlo del Japon eve	total a	any such amounts in the fo	ollowing chart. If necessary, list additional	al entries on a separate page.	
		Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount	
3	a.			\$	7
43.5 23.54	b.			\$	7
	C.			\$	
Y Salada	d.			\$	
#####	e.			\$	4
				Total: Add Lines a - e	\$
•	as pri	iority tax, child support and	rity claims. Enter the total amount, div alimony claims, for which you were liable tions, such as those set out in Line 2	e at the time of your bankruptcy	\$
			penses. If you are eligible to file a case		
2 1 2 3		ollowing chart, multiply the a nistrative expense.	amount in line a by the amount in line b,	and enter the resulting	
1.444	a.	Projected average month	ily Chapter 13 plan payment.	\$	
•	b.		r district as determined under		
		schedules issued by the Trustees. (This informati	Executive Office for United States on is available at		
		or from the clerk of the ba		x	
1	C.	Average monthly adminis	strative expense of Chapter 13 case	Total: Multiply Lines a and b	\$
	Total	I Deductions for Debt Pa	yment. Enter the total of Lines 42 thr	rough 45	 s
	7697		Subpart D: Total Deduc		
7	Total	of all deductions allowe		of Lines 33, 41, and 46.	l _s
			VI. DETERMINATION OF §	707(b)(2) PRESUMPTION	
	Enter		8 (Current monthly income for § 707)		s
			7 (Total of all deductions allowed und		\$
					3
<i>7</i>	Mont result	thly disposable income u	inder § 707(b)(2). Subtract Line 49 to	from Line 48 and enter the	\$
S 10 20 4					
an works	60-m	onth disposable income	under § 707(b)(2). Multiply the amo	ount in Line 50 by the	
		onth disposable income per 60 and enter the result.	under § 707(b)(2). Multiply the amo	ount in Line 50 by the	\$
	numb Initia	er 60 and enter the result. I presumption determina	ntion. Check the applicable box and pro	oceed as directed.	
	numb Initia Th	per 60 and enter the result. I presumption determinate amount on Line 51 is le	ntion. Check the applicable box and proess than \$7,025* Check the box for "T	oceed as directed. The presumption does not arise" at the top of page 1	
	numb Initia Th this s	per 60 and enter the result. I presumption determinate amount on Line 51 is lost attement, and complete the	ntion. Check the applicable box and pro ess than \$7,025* Check the box for "T be verification in Part VIII. Do not complet	oceed as directed. The presumption does not arise" at the top of page 1	
	Initia Initia Th this s Th page	per 60 and enter the result. I presumption determinate amount on Line 51 is lest atement, and complete the amount set forth on Lie 1 of this statement, and complete the statement.	ntion. Check the applicable box and process than \$7,025* Check the box for "1 e verification in Part VIII. Do not complet ne 51 is more than \$11,725* Checomplete the verification in Part VIII. You	oceed as directed. The presumption does not arise" at the top of page 1 te the remainder of Part VI. ck the box for "The presumption arises" at the top of may also complete Part VII. Do not complete the rem	of
	Initial Initial Th this s Th page	per 60 and enter the result. I presumption determinate amount on Line 51 is lest atement, and complete the amount set forth on Lie 1 of this statement, and complete the statement.	ntion. Check the applicable box and pro- ess than \$7,025* Check the box for "T e verification in Part VIII. Do not complet ne 51 is more than \$11,725* Chec	oceed as directed. The presumption does not arise" at the top of page 1 te the remainder of Part VI. ck the box for "The presumption arises" at the top of may also complete Part VII. Do not complete the rem	of
2	Initia Initia Th this s Th page Th VI (L	per 60 and enter the result. I presumption determinate amount on Line 51 is lest attement, and complete the amount set forth on Lie 1 of this statement, and complete amount on Line 51 is a lines 53 through 55).	ntion. Check the applicable box and process than \$7,025* Check the box for "1 e verification in Part VIII. Do not complet ne 51 is more than \$11,725* Checomplete the verification in Part VIII. You	oceed as directed. The presumption does not arise" at the top of page 1 te the remainder of Part VI. ck the box for "The presumption arises" at the top of may also complete Part VII. Do not complete the rem	of
	Initia Initia Initia Th this s Initia Th page Initia VI (L	per 60 and enter the result. I presumption determinate amount on Line 51 is lest attement, and complete the amount set forth on Lie 1 of this statement, and coe amount on Line 51 is a ines 53 through 55). The amount of your total should debt payment amount am	ess than \$7,025* Check the box and pro- ess than \$7,025* Check the box for "To evenification in Part VIII. Do not complete the 51 is more than \$11,725* Checomplete the verification in Part VIII. You in the least \$7,025*, but not more than \$11 all non-priority unsecured debt	oceed as directed. The presumption does not arise" at the top of page 1 te the remainder of Part VI. ck the box for "The presumption arises" at the top of may also complete Part VII. Do not complete the remainder of Part 1,725*. Complete the remainder of Part	of nainder of Part VI.
	Initia In	per 60 and enter the result. I presumption determinate amount on Line 51 is lest attement, and complete the amount set forth on Line 1 of this statement, and care amount on Line 51 is a sines 53 through 55). The amount of your total shold debt payment amount amount.	ess than \$7,025* Check the box and pro- ess than \$7,025* Check the box for "To evenification in Part VIII. Do not complete the 51 is more than \$11,725* Checomplete the verification in Part VIII. You in the least \$7,025*, but not more than \$11 all non-priority unsecured debt	oceed as directed. The presumption does not arise" at the top of page 1 te the remainder of Part VI. Ck the box for "The presumption arises" at the top of may also complete Part VII. Do not complete the remainder of Part 1,725*. Complete the remainder of Part	of nainder of Part VI.
	Initial Th this s Th page Th VI (L Enter	per 60 and enter the result. I presumption determinate amount on Line 51 is lest attement, and complete the amount set forth on Lie 1 of this statement, and core amount on Line 51 is a ines 53 through 55). In the amount of your total shold debt payment amount on Line 51 is lest amount on Line 51 is le	ess than \$7,025* Check the box and pro- ess than \$7,025* Check the box for "To evenification in Part VIII. Do not complete the serification in Part VIII. To not complete the verification in Part VIII. You at least \$7,025*, but not more than \$11 at non-priority unsecured debt to unt. Multiply the amount in Line 53 to minimation. Check the applicable box a less than the amount on Line 54. Check the series of the series o	oceed as directed. The presumption does not arise" at the top of page 1 te the remainder of Part VI. Ick the box for "The presumption arises" at the top of may also complete Part VII. Do not complete the remainder of Part Complete the remainder of Part by the number 0.25 and enter and proceed as directed. The presumption does not arise at the top of page 1.	of nainder of Part VI.
	Initia Initia Th this s Th page Th VI (L Enter Three the re	per 60 and enter the result. I presumption determinate amount on Line 51 is lestatement, and complete the amount set forth on Lie 1 of this statement, and coe amount on Line 51 is a ines 53 through 55). In the amount of your total shold debt payment amount on Line 51 is lest op of page 1 of this statement.	ess than \$7,025* Check the box and pro- ess than \$7,025* Check the box for "To everification in Part VIII. Do not complete the serification in Part VIII. Pound the serification in Part VIII. You in the serification in Line 53 in the serification. Check the applicable box a sess than the amount on Line 54. Cheent, and complete the verification in Part	oceed as directed. The presumption does not arise" at the top of page 1 te the remainder of Part VI. Ick the box for "The presumption arises" at the top of may also complete Part VII. Do not complete the remainder of Part Complete the remainder of Part by the number 0.25 and enter and proceed as directed. The presumption does not arise at the top of page 1.	of nainder of Part VI.

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		PART VII. ADDITIONAL	EXPENSE CLAIMS	
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.			
56		Expense Description	Monthly Amount	
- 30	a.		\$	
	b.		\$	
	C.		\$	
		Total: Add Lines a, b, and c	\$	
		Part VIII: VERI	FICATION	
	both d	re under penalty of perjury that the information provided in this statebtors must sign.)	tement is true and correct. (If this a joint case,	
57	Date: _	12-9-10 Signature: (Debtor)	if Sim	
	Date: _	12-04-20/Lignature:	The state of the s	
F 1 37 9.31				

^{*}Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.